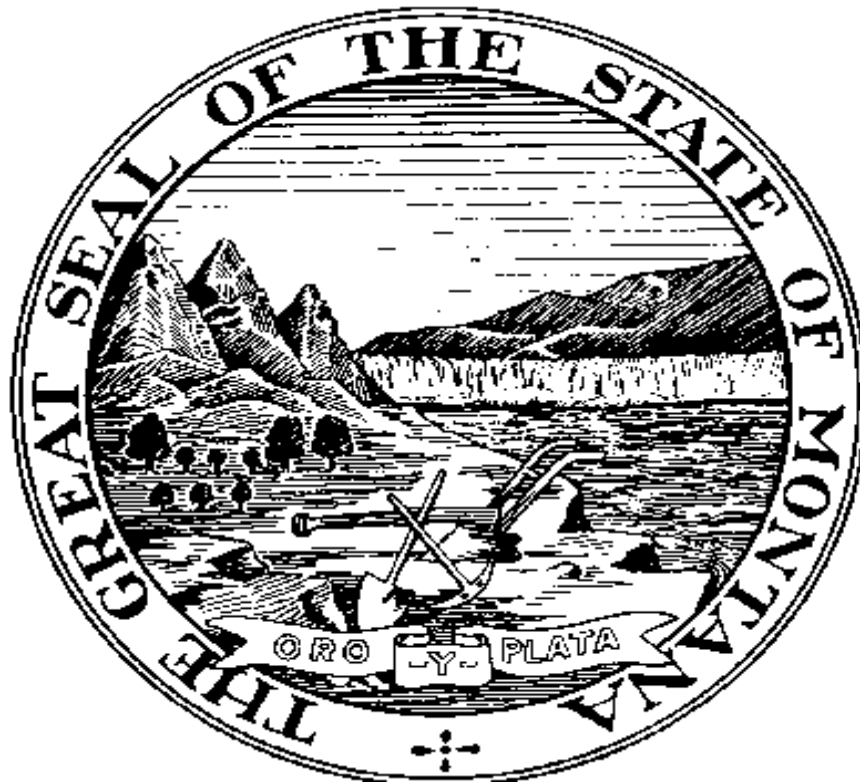


# **RESPIRATORY PROTECTION PROGRAM**

**Occupational Safety & Health Bureau**



**Montana Department of Labor & Industry**

Prepared for Montana Employers  
by the

**Occupational Safety & Health Bureau  
Department of Labor and Industry  
P.O. Box 1728  
Helena, Montana 59624-1728  
(406) 444-6401**

# RESPIRATORY PROTECTION PROGRAM

## Policy Statement

The purpose of this Policy and Procedure is to ensure adequate protection of all (company) employees from respiratory hazards and ensure compliance with applicable federal and state standards. Respirators are only to be worn as an interim control until feasible engineering and/or administrative control can be implemented unless it has been demonstrated that such controls are not feasible. Respirators can also be used during certain special application jobs such as non-routine maintenance or repairs. Compliance with the requirements of this policy is a condition of employment and will be strictly enforced under the referenced disciplinary procedure.

## Responsibilities

Management and supervisors who are responsible for respirator wearers will be held accountable for the implementation and enforcement of their aspects of the program. The (plant manager, etc.) has the responsibility of designating the Respirator Program Administrator (RPA). The RPA has the authority and responsibility to implement and revise the program as necessary.

## Duties of the Respiratory Program Administrator

- A. (name) will be the Respirator Program Administrator (RPA). This individual has specific duties in assuring proper implementation of the respiratory protection program and continued compliance of the overall program. This person has sufficient knowledge and experience with OSHA and other consensus standards to carry out his or her duties. This individual will keep abreast of new developments in respirator use and technology to ensure on going adequacy of the program.

In his or her absence, (Supervisor, foreman, etc.) will assume the duties of the RPA.

- B. Specific responsibilities will include but not be limited to:

1. Generating Standard Operating Procedures
2. Selection and Purchase
3. Instruction and Training
4. Fit Testing and Issuing Respirators
5. Cleaning and Maintenance
6. Inspection
7. Surveillance of Work Environment

8. Medical Use Practices
9. Program Evaluation
10. Annual Comprehensive
11. Random checks
12. Record Maintenance
13. Standard Operating Procedures/Program Modification

### **Selection**

Respirators are in use for protection against     (hazard)     at concentrations up to [the appropriate protection factor] times the PEL during routine operation of the     (equipment)     at     (location)    .     (North and Survivair) half mask respirators with (dust/mist filter)     have been selected. These respirators are NIOSH approved and are appropriate for protection against respirable silica dust.

### **Use Of Approved Respirators**

- A. All     (specific job titles)     shall wear one of the following RESPIRATORS throughout their work shifts:

(SPECIFY HERE HALF-MASK, FULL FACEPIECE, QUARTER-MASK, DUST RESPIRATOR (FILTERING FACEPIECE), SUPPLIED AIR, etc., and the models and approval numbers

1. Model xxxx, sizes S,M,L (TC-21C-xxx)
2. Model xxxx, sizes S, M, L (TC-21C-xxx)  
for example.

New employees will be provided opportunity to select from a variety of manufacturers and models of respirators.

- B. The approved assembly shall be worn as issued.
- C. Only company-issued, approved respirators shall be used. (or acceptable employee owned respirators, if applicable).
- D. All respirator approvals shall be verified.
- E. No employee shall alter or change any part of the issued respirator assembly.

### **Purchasing**

- A. This company's policy shall ensure an uninterrupted consistent supply of selected respirators.
- B. Purchases of respirators, assemblies, subassemblies and their filters shall be in accordance with those specified in the "Use of Approved Respirators" section.

C. Respirator purchasing shall be coordinated through (name).

### **Inventory Control Including Issuing**

- A. (name), in accordance with company policy, shall be responsible for inventory control and issuing of all approved respirators.
- B. All respirator inventory control shall be maintained by verifying respirator assembly with approved label in Appendix A.
- C. The issuer(s) (identify) shall be trained in accordance with the company's training standard operating procedure.
- D. When issuing a respirator, some system of positively identifying the user and providing the correct model and size for which the user has been fit tested shall be used. {A card system may be used. The card shall bear a picture of the wearer, verification of training, and the respirator type to be issued.}

### **Fit Testing**

FIT TESTING is performed to ensure proper fit of the respirator; (contaminant) has been shown to cause respiratory disease or other adverse health effects. Fit testing will be performed prior to initial assignment or use and every 12 months thereafter. The protocols for fit testing include the isoamyl acetate protocol (with organic vapor cartridges), the irritant smoke protocol (with high efficiency particulate air cartridges), and the saccharin or Bitrex protocols (with particulate cartridges, filters, or facepieces), referenced in 29 CFR 1910.134 APPENDIX A. The person responsible for fit testing is the (Safety Officer/OHN, etc.) Fit testing will be conducted at (location). For each employee, fit testing shall be performed with all of the personal protective equipment that employee might use. The (manufacturer, type) respirators in small, medium and large will be available for employee fit testing.

### **Cleaning and Disinfection**

- A. Each employee has been issued his or her own respirator, and will be responsible for cleaning and disinfecting it. The (specific work area) area supervisor will be responsible for frequent spot checks to ensure that the cleaning and disinfecting standard operating procedure will be followed. Employees who are noted to be not following correct procedures will be referred for further training or discipline.

B. Cleaning And Disinfecting Of Respirators.

1. Each employee shall thoroughly clean and disinfect his/her respirator at the end of each work shift. If an employee notes internal contamination of the respirator during their shift, he/she shall thoroughly wipe out their respirator with (safety wipes) provided by the company.
2. Respirators, when they are removed to change cartridges, wash the face, inspect, etc., must be removed in an area free of contamination.
3. At the end of the shift, each employee shall remove their respirator and inspect and clean it as required. Filter change schedules shall be established and adhered to conscientiously.
4. The employee shall proceed to the sink/shower area. Respirators shall be thoroughly rinsed with water at the sink. Their respirator shall then be dismantled, including removal of straps, exhalation valve cover, exhalation valve, inhalation valves and filter holders. Each component shall be washed with the mild detergent solution for respirator cleaning. The supply of this solution shall be monitored daily by the supervisor.
5. Following cleaning, the respirator components shall be placed in a 50 ppm bleach solution for ten minutes. The shakeout supervisor shall ensure a daily new supply of this solution (2 tablespoons bleach, 1 gallon water). The purpose of this procedure is for disinfection. Due to the expected work temperatures, the company will enforce daily disinfection.
6. Following disinfection, each respirator component shall be thoroughly rinsed in fresh, running tap water.
7. The components of each respirator shall then be placed on the drying shelf assigned.
8. When dry, appropriate storage procedures shall be followed, as per the storage standard operating procedure.
9. Respirators used in fit testing shall be cleaned and disinfected after each use.

Note: Any defects, necessary repairs, or needed component replacement noted during cleaning and disinfecting shall be handled in accordance with the appropriate standard operating

procedure.

### **Inspection**

- A. All respirators shall be inspected by the wearer immediately before and after each use to ensure adequate protection against (contaminant). The inspection shall include as a minimum the following items:
  - 1. Appropriate NIOSH approval numbers on filters.
  - 2. Elasticity, cracks, tears, holes or other distortions or missing parts which would diminish the effectiveness of the face piece.
  - 3. The condition of component parts-straps, valves, valve covers, filters, filter seats, filter threads and filter casings.
  - 4. Ensure that all component parts are of the same manufacturer.
  - 5. Ensure cleanliness of the respirators.
- B. If the respirator fails to pass any of the inspection criteria, the respirator shall be immediately removed from use and given to the supervisor. Employees shall not work until suitable respirators are provided.
- C. Repairs - All replacement of parts or repairs shall be done by the designated supervisor trained in replacement and repair. All respirators or parts not capable of being repaired shall be discarded.
- D. Storage - After cleaning, and at the end of use each employee shall store his/her respirator in the sealable container provided by the employer for such use, and in the designated respirator storage cabinets. The storage cabinets shall protect against distortion dust, sunlight, heat, cold, moisture and damaging chemicals in the inventory room.

### **Training**

Effective training will be given to all employees required to use respirators. If respirators are provided for voluntary use or employees provide their own respirators they will also be trained. The training is comprehensive, understandable, and recurs annually, and more often if necessary.

- A. The elements of the respirator training program are the following:

1. Why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effects of the respirator;
2. The limitations and capabilities of the       (Model)       respirator;
3. How to use the respirator effectively in emergency situations, including respirator malfunctions;
4. How to inspect, put on and remove, use, and check the seals of the respirator;
5. How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators; and
6. The general requirements of the respiratory standard 1910.134.

B. Training program requirements

1. All employees will be trained prior to requiring the employee to use a respirator.
2. Training shall be conducted in a manner that is understandable to employees.
3. New employees with previous respirator training must demonstrate they have received training within the last 12 months that addresses the elements above.
4. Retraining is administered annually, and whenever an employee shows inadequacies in the proper use of respirators.
5. All training records are documented on/in location.

**Workplace Surveillance**

- A. Workplace inspections of all areas will be conducted by the Safety Officer/Occupational Health Nurse on an unannounced basis at least once per quarter.
- B. The Respirator Protection Checklist 1910.134 (modified for the specific operation) will be utilized for evaluating the program. If any changes are found or any new equipment has been introduced since the last inspection, an industrial hygienist will be brought in to make a workplace survey. Exposures will be periodically monitored.
- C. Discrepancies in the workplace surveillance will be reported in writing to the Chief Executive Officer with a copy to the

shop supervisor.

- D. The Respiratory Protection Program will be evaluated annually by (the Safety Officer/Occupation Health Nurse, etc.) to ensure that the employees are following company procedures and that the program is operable and viable. There will be a formal report presented to the (responsible authority) based on the annual evaluation.

### **Medical Evaluation**

(Company name) will provide a medical evaluation to determine the employee's ability to use a respirator, before the employee is fit tested or required to use a respirator. Physician or other licenced health care professional PLHCP) will perform medical examinations using a medical questionnaire, see 1910.134 Appendix C, for questionnaire.

#### **A. Follow-up medical examination**

1. A follow-up examination will be provided for an employee who gives a positive response to any question among questions 1-8 in section 2, Part A of Appendix C.
2. The follow-up medical examination shall include any medical tests, consultations, or diagnostic procedures that the PLHCP deems necessary to make a final determination.

#### **B. Administration of the medical questionnaire and examinations**

1. The medical questionnaire and examinations shall be administered confidentially during normal working hours or at a time and place convenient to the employee.
2. The employee will have an opportunity to discuss the questionnaire and examination results with the PLHCP.

#### **C. Supplemental Information for the PLHCP.**

The following information will be provided to the PLHCP before he/she makes a recommendation concerning an employee's ability to use a respirator:

1. Type and weight of the respirator to be used by the employee;
2. Duration and frequency of respirator use;
3. Expected physical work effort of employee;
4. Additional protective clothing and equipment to be worn;
5. Temperature and humidity extremes that may be



encountered; and

6. A copy of the written respiratory protection program and a copy of 29 CFR 1910.134.

D. Medical determination

In determining the employee's ability to use the respirator the company will

1. Obtain a written recommendation regarding the employee's ability to use the respirator from the PLHCP. The recommendation will provide the following:
  - (a.) Any limitations on respirator use related to the employee's medical conditions and workplace conditions, including whether or not the employee is medically able to use the respirator;
  - (b.) The need, if any for follow-up medical evaluations; and
  - (C.) A statement that the PLHCP has provided the employee with a copy of the PLHCP's written recommendation.

E. Additional medical evaluations

The company will provide additional medical evaluation if:

1. An employee reports medical signs or symptoms that are related to ability to use a respirator;
2. A PLHCP, supervisor, or the RPA informs finds the need to reevaluate the employee;
3. Observations made during fit testing and program evaluation indicate a need for employee reevaluation;  
or
4. A change occurs in the workplace conditions that may result in a substantial increase in the physiological burden placed on employee.

**Medical History**

Where an employee has had prolonged medical illness (specify) such an employee shall not be assigned tasks requiring respiratory protection.

Use of Physical Exam Results and Medical History  
Plant physician shall use the latest ANSI Z 88.6 Guidelines in conjunction with the latest NIOSH Guidelines for evaluating

Employees' ability to use (type) respirators.

Where doubts exist a reevaluation shall be effected.

### **Facial Hair Policy**

Facial hair that passes between the seal of a respirator or interferes with any valve shall not be allowed.

#### **Standard Operating Procedure for Facial Hair:**

1. Reassignment of employees with medical and/or religious reasons for having facial hair to operations where respirators are not required may be considered.
2. Employees experiencing a leak due to facial hair shall remove the facial hair and be fit tested before performing the assigned task requiring respirator.
3. Employees wearing respirators shall be expected to have hair removing amenities on hand, or report to work clean shaven. (Lockers) Time will be allocated as deemed necessary, by the employer, for hair removal.

### **Contact Lenses Policy:**

Except in cases where a chemical manufacturer recommends against or prohibits their use, contact lenses will be permitted with half mask respirators provided that additional eye protection is utilized.

#### **Standard Operating Procedure for Contact Lenses:**

1. Safety glasses with side shields and/or impact goggles shall be worn with contact lenses.
2. Such equipment shall be inspected before use.
3. Supervisors should know who wears contact lenses.

### **APPENDIX A**

List of respirators used on the premises.

## **State Occupational Safety and Health Consultation Project**

A source of assistance with construction and general industry safety and health is the Montana Onsite Consultation Project. This division of the Department of Labor and Industry operates independently of OSHA's enforcement branch. The program was developed with small businesses in mind, and is available to private sector employers who want help in recognizing and correcting jobsite hazards.

When an employer uses the service, a trained occupational safety and health professional conducts a free onsite "inspection" and consultation. No citations or penalties are given for any of the problems that the inspector/consultant may find, and the service is completely confidential. The employer has the responsibility and obligation through the program to correct the identified hazards within an allotted amount of time. In addition, the consultant can assist in developing and maintaining an effective safety program, offer jobsite training and education for employees, and help locate other sources of assistance for safety and health concerns.

Although this program can be beneficial, you must realize that there is still no guarantee that a jobsite that has received the consultation services will "pass" an OSHA inspection. For information about Montana's Onsite Consultation Project please contact:

Safety & Health Bureau  
Department of Labor and Industry  
P.O. Box 1728  
Helena, MT 59624-1728  
(406) 444-6401

## Resources

Information about respiratory protection and safety and health standards can be obtained from the sources listed bellow:

1. U.S. Department of Labor, **Occupational Safety & Health Administration**, (OSHA).

Public Affairs Office- Room 3647, 200 Constitution Ave.,  
Ashington, D.C. 20210.

Phone: (202)693-1999.

[www.osha.gov](http://www.osha.gov)

2. **National Institute for Occupational Safety and Health**,

(NIOSH). Department of Health and Human Services,

200 Independence Ave. SW 317B, Washington, DC 20201.

Phone: 1-800-356-4674, 1-800-35-NIOSH.

[www.niosh.gov](http://www.niosh.gov)

3. **American Conference of Governmental Industrial Hygienists (ACGIH)**.

1330 Kemper Meadow Drive, Cincinnati, OH 45240-1634.

Phone: (513)742-2020, Fax: 1-513-742-3355.

[www.acgih.org](http://www.acgih.org)

4. **American National Standards Institute, (ANSI)**.

11 West 42nd Street, New York, NY 10036.

Phone: (212) 642-4900, Fax: (212) 398-0023.

[www.ansi.org](http://www.ansi.org)

5. **National Safety Council**.

1121 Spring Lake Drive,

Itasca, IL 60143-3201

Phone: (630) 285-1121, Fax: (630) 285-1315.

[www.nsc.org](http://www.nsc.org)